

Serial No. 10/087,205

Response to Office Action dated October 29, 2009

Remarks

The applicant provides the following remarks in response to the non-final Office Action bearing a mailing date of October 29, 2009. No claims are currently amended. Claims 8-14 are cancelled, without prejudice. Claims 1-16 are currently pending. The applicant respectfully requests withdrawal of the pending rejections in light of the foregoing amendments and the following remarks.

1. Claims 1-4, 6-10, and 12-16

Claims 1-4, 6-10, and 12-16 stand rejected as being obvious over Campbell et al. (US 2005/0137530), Malave et al. (US 2002/0193679), and in further view of Hirschman (US 4,854,324). The applicant respectfully traverses this rejection for at least the reasons herein, and does not concede any characterizations of the pending application or the cited references set forth in the Office Action. Claims 8-10 and 12-14 were cancelled and the rejection of these claims is now moot.

a. Pending Claims

Claims 1-4, 6, and 7 comprise the acts of, "retrieving at least one banner from memory of the programmable pump, the banner comprising substantially freely-editable, patient-identifying content; and displaying the retrieved at least one banner in the home page on the screen of the programmable pump." Claim 15 similarly recites a pump comprising a processor programmed to (i) "retrieve a banner from the data port, the banner comprising substantially freely-editable, patient-identifying content," and (ii) "store the banner in memory, and (d) display the banner in the home page on the screen." Claim 16 also similarly recites a pump comprising (i) "memory storing a list of selectively available banners, the banner comprising substantially freely-editable, patient-identifying content," and (ii) a processor programmed to "generate a user interface having a plurality of pages configured for display on the screen of the pump, at least one of the pages being a home page" and to "display the banner in the home page on the screen."

No combination of the cited references can result in these claimed combinations of elements. Even if they did, one skilled in the art would not seek to combine the teachings to arrive at the claimed combinations.

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b. Campbell

Campbell fails to disclose a home page or a banner. Even if it did disclose these elements, it does not disclose a banner displayed on a home page. The Office Action cites paragraph [0006] as disclosing a home page. However, the disclosure regarding displays in this paragraph states only that an infusion system "visually displays one or more screens containing the information. At least one of the one or more screens includes a menu with at least two menu items, and the input device is used to select one menu item from amongst the at least two menu items." This cited paragraph discloses only that two or more screens include a menu. A home page is a page that is a starting page for the user interface on a pump. It may, or may not, include a menu. Conversely, pages and screens other than a home page can include menu items. Campbell does not disclose a home page.

The Office Action also cites paragraph [0058] from Campbell as disclosing the act of retrieving a banner. This cited paragraph discusses data communication with an infusion device. The only disclosure the cited paragraph includes about data is:

[D]ata generated at the infusion device 10 can be used alone or combined with data from a glucose meter, a glucose monitor, a glucose sensor, and/or other devices (all of which are not shown) to assist the user and/or the health care professional in making intelligent therapy decisions. Moreover, the information, programs, and data may be downloaded to a remote or local PC, laptop, or the like, for analysis and review by a MiniMed employee or a trained health care professional.

This cited passage discloses only that the infusion device can generate data to assist the user and/or caregiver when making decisions. It does not disclose any type of a banner.

Finally, the Office Action cites reference number 18 of Figure 22 for disclosing a banner displayed on a home page. However, the screen illustrated in Figure 22 does not include banners. It displays only the value of parameters and related labels. Even if the screen did display a banner, the screen is not a home page as stated in the Office Action. Rather, the screen illustrated in Figure 22 is merely a status screen. Campbell at ¶ [0041].

Campbell fails to disclose a home page, a banner, a banner comprising substantially freely-editable, patient-identifying content, or banner displayed on a home page.

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c. Malave

Malave has similar failures in its disclosure. Page 3 of the Office Action acknowledges that it fails to disclose a substantially freely-editable banner as recited in the claims. It also fails to disclose a home page as recited in the claims.

Furthermore, one skilled in the art would not combine the teachings of Malave with the other cited references to arrive at the claimed combination of elements. Malave teaches entering a patient's given name into medical records stored on a computer, not the pump. See, e.g., Figures 13 and 14. The computer then uploads data from the pump, see, e.g., Figure 3, and generates various reports. The only direction in which it discloses the flow of data is from the pump to the computer so the computer can generate reports and the like. It does not disclose uploading information from the computer to the pump. The displays showing the information downloaded from the pump are primarily intended for caregivers.

One skilled in the art would not look to art for generating reports on a computer such as disclosed in Malave when developing a combination elements that is directed to the patient or pump user independent of the caregiver and that includes freely-editable banners that are displayed on the home page of a pump.

d. Hirschman

Hirschman also fails to disclose either a banner comprising substantially freely-editable content or a home page. The Office Action cites col. 13, lines 42-50 as disclosing a banner having a freely-editable content. However, the cited portion of Hirschman states:

If the single or multiple arming button 170 has not been pressed, the system checks to determine whether the store button 174 has been pressed. If it has, then the sentinel 130 displays the message "ENTER PREPROGRAMMED INJECTION NUMBER". The operator then enters and the system waits for a program number 1 to 99 and stores injection parameters for all levels at this program number. The sentinel 130 then displays the message, "ENTER TITLE FIELD AND STORE" and the operator enters a title field, comprising 1 to 32 characters, and the system stores these title fields.

This cited passage makes no disclosure of a freely-editable banner. It discloses entering only an injection number in the range 1-99 and a related title. Each injection number and title identifies

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and is linked to a set of delivery parameters for the pump. See, e.g., col. 10, lines 26-44. The user can then retrieve the set of operating parameters by entering the injection number and/or title. The disclosed injection number is not a freely-editable banner. It is a defined number limited to a value in the range 1-99 or a title, which define and are linked to a specific set of stored pump parameters. Furthermore, Hirschman discloses a single user interface screen into which the injection number and title is entered. There are no other screens disclosed and no home page.

Hirschman fails to teach or suggest a home page, a banner, a banner comprising substantially freely-editable, patient-identifying content, or banner displayed on a home page.

Therefore, no combination of the cited references can result in the claimed combination of elements, which include a home page and a banner having substantially freely-editable, patient-identifying content. Even if they did disclose all of the cited references, one skilled in the art would not be motivated to look to all of these references to arrive at the pending claims. For at least these reason, the applicant respectfully submits the pending claims are not obvious in view of the cited references and requests withdrawal of the pending rejection.

2. Claims 5 and 11

Claims 5 and 11 stand rejected as being obvious over Campbell, Malave, Hirschman and further in view of Estes et al. (US 2003/0114836). The applicant respectfully traverses this rejection and does not concede any characterizations of the pending application or the cited references set forth in the Office Action. Claim 11 was cancelled and the rejection of this claim is now moot.

Claim 5 depends from claim 1 and therefore also recites generation and display of a banner on a pump, the banner comprising substantially freely-editable, patient-identifying information. As discussed above, Campbell, Malave, and Hirschman all fail to disclose such an element. Estes also fails to disclose this element. Estes illustrates, without explanation, inclusion of facility and physician information into predefined fields of a patient record. Estes fails to disclose either substantially freely-editable fields, or display of a banner including patient-identifying information as recited in the claims.

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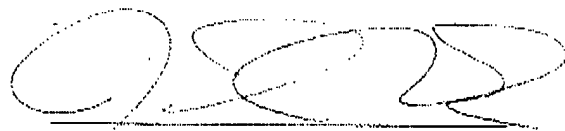
Conclusion

For at least these reasons, the applicant requests allowance of the pending claims and advancement of this application to issuance. The applicant notes that there may be additional reasons and arguments in support of patentability for the pending claims, and the applicant reserves the right to raise any such reason in the future.

Please call the undersigned attorney if there are any questions or if it would be helpful to discuss any issues during the examination of this application.

Respectfully submitted,
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